Q: You say that the primary care shortage is a real thing and it could bring about a "train wreck" for U.S. healthcare. Do you see any way of alleviating the primary care shortage that does not involve higher compensation for primary care physicians (PCPs)?

A: Higher compensation for PCPs is a necessary but not sufficient condition of alleviating the impending shortage. We also need new products and new relationships that are worth the additional money. The Brits more than doubled PCP compensation and that's what we're going to have to do. But there are a lot of ways to do it. We (patients and payers, including Medicare) need to begin paying (monthly) for PCP relationships, not as a shadow system that retains all the chickensh*t, check-the-box fee-for-service documentation burden, but as a substitute. We need to free up about a day a week of clinician time by simplifying how we pay for care, so that per-hour clinician comp rises, but also we also get longer and deeper visits when they are needed.

Brits <u>doubled PCP</u> compensation,

US <u>halved specialist</u> compensation